SB/01 (10/05)

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DECLARATION FOR		R Attorney Docket Number	48003-5					
DESIGN		First Named Inventor						
PATENT APPLI		(	COMPLETE IF KNOWN					
(37 CFR <u>1</u> .63)		Application Number	New Application					
Declaration	Declaration	Filing Date	March 30, 2006					
Submitted With Initial	Submitted after Initial Filing	Art Unit						
Filing OR	(surcharge 37 C	CFR Framiner Name		ł				
	1.16 (e) require	d) Lxammer Hame						
I hereby declare that:								
Each inventor's residence, mailing								
I believe that the inventor(s) nam	ed below to be the	e original and first inventor(s) of	the subject matter which is claimed and for	which				
a patent is sought on the invention	on entitled:			7				
CHELA	ATE BASED	SCAFFOLDS IN TU	MOR TARGETING					
		(Title of the Invention)						
The specification of which		•						
is attached hereto								
OR								
was filed on (MM/DD/YYY	Y) 09/3	30/2004 as United State	es Application Number or PCT International					
Application Number PCT/US2004/032289 and was amended on (MM/DD/YYYY) (if applicable).								
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as								
I hereby state that I have reviewed and understand the contents of the above-identified specification, instanting amended by any amendment specifically referred to above.								
		state to annual to notont	ability as defined in 37 CFR 1.56, include	ding for				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation in-part-applications, material information which became available between the filing date of the prior application and								
the national or PCT international filing date of the continuation-in-part application.  I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or 365(b) of any foreign application which designated at least one country other								
I hereby claim foreign priority b	enefits under 35 U	J.S.C. 119 (a)-(d) or (t), or 365(	of any loteign application(3) for patient	try other				
or plant breeder's rights certification the United States of Ame	cate(s), or 300(a) erica. listed below	and have also identified below	w, by checking the box, any foreign applic	ation for				
or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designates at the box, any foreign application for than the United States of America, listed below and have also identified below, by checking the box, any foreign application for than the United States of America, listed below and have also identified below, by checking the box, any foreign application for that the patent, inventor's or plant breeder's rights certificate, or of any PCT international application having a filing date before that of the								
application on which priority is	claimed.		Priority Certified Copy Attac					
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY)	Filotity	No				
Number(s)	Country	(mm-21111)						
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1	1							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.								
Additional foreign application numbers are listed on a supplemental promy containing application (s) listed below.  I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s)		Filing Date (MM/DD/YYYY)		lication				
	<del></del>	09/30/2004 Additional provisional application and provisional application application and provisional application and provision and provision application and provision application and provision application and provision application application and provision application application and provision application and provision application and provision application application and provision application application application and provision application application application application and application applicatio						
supplement				sheet				
PTO/SB/02B attached hereto.								
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Direct all	☐ The address	The address associated		30565	OR	Corre	espondence	
correspondence to:	with Custome	er Number:		30300	<u>'</u>	addr	ess below	
Name								
Address								
City		<u> </u>	State	<u> </u>			ZIP	T
Country		Tele	phone		.,		Email	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventor.								
Given Name	Joseph P			Family Name		Garlich		
(first and middle [if an	y])	Joseph R.			or Surname			
Inventor's							Date	
Signature	) 							
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Mailing Address								
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(first and middle [if an	f any])			or Surname			Sı	ıhr
Inventor's Date								
Signature							Date	
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Mailing Address								
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City	State			ZIP			Co	ountry
Greenfield	ield IN			46140			US	;
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								

NAME OF JOINT INVENTOR, IF ANY:		A petition has been filed for this unsigned inventor.						
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Inventor's Signature				Date				
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Inventor's Signature				Date				
Residence: City	State		Country		Citizenship			
Mailing Address		<u>.</u>	L					
City	State		ZIP		Country			
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Given Name Family Name or Surname								
Inventor's Signature				Date				
Residence: City	State		Country		Citizenship			
Mailing Address	•							
City	State		ZIP		Country			
NAME OF JOINT INVENTOR, IF ANY:	NAME OF JOINT INVENTOR, IF ANY:  A petition has been filed for this unsigned inventor.							
Given Name Family Name (first and middle [if any]) or Surname								
Inventor's				Date				
Signature Residence: City	State	- 4	Country		Citizenship			
Mailing Address								
City	State		ZIP		Country			